FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 29 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000077795 (8)

HOFFN Principal Plac	MAN SCHILLER, INC.	Mail	ing Address				
1610 SOUTHERN BLVD 1610 SOUTHERN BLVD							
WEST PALM BEACH FL 33406 WEST I			ST PALM BEACH FL 33406		DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified	THIS CLASS
						09/18/1996	
2. Principal Place of Business			2a. Mailing Address			4, FEI Number	Applied For
Suite, Apt. #, etc.			Suite, Apt. #, etc.			65-0699994	Not Applicable
22			27			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State			City & State			Election Campaign Financing	\$5.00 May Be
23			28			Trust Fund Contribution	Added to Fees
Zip	Country	1	'ip	Country	<i>'</i>	8. This corporation owes or has paid	
24	25 Name and Address of Currer	29 nt Registe	red Agent	30		Personal Property Tax due June 3 10. Name and Address of New Reg	
но	FFMAN, ALLAN L	gioto	ios rigoni	81	Name	10. Hame and Address of Not Heg	istored Agent
1610 SOUTHERN BLVD				82	Ciront Ada	dress (P.O. Box Number is Not Acceptable	_\
WEST PALM BEACH FL 33406					Sireel Aut	Bress (F.O. Box Number is Not Acceptable	e)
	,			83			
				84	City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes					e-named cor	rporation submits this statement for the pu	roose of changing its registered
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obtainations of, Section 607.0505, Florida Statutes. 							
SIGNATURE	, , , , , , , , , , , , , , , , , , ,		300001	oned ototolo	σ .		
	Signature, typed or printed name of registered age				ont signature requ	ited when reinstating)	DATE
12.	OFFICERS AN PRESIDENT	D DIRL CT	DELETE	13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12 Change Addition
NAME	HOFFMAN, ALLAN L		الماري الماري	1.2 NAME			Change Li Abolilon
STREET ADDRESS	1610 SOUTHERN BLVD		i i		ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL 3340	6		1.4 CITY - S			
TITLE	TREASURER	DELETE	2.1 TITLE			Change Addition	
NAME	JAMES SCHILL		2 2 NAME				
STREET ADDRESS	2633 Lantana Rd., #3601			23 STREET	ADDRESS	•	
CITY-ST-ZIP	Lantana, Fl 33463			2.4 CITY-ST-ZIP			
TITLE	Vice President - DOLLIE			3.1 TITLE			Change Addition
NAME	Thomas Terwilliger			3.2 NAME			
STREET ADDRESS	2633 Lantana Rd., #36		3.3 STREET	1			
CITY-ST-ZIP TITLE	Lantana, FL 33462		3 4. CITY - ST - ZIP 4 1 TITLE			Change Addition	
NAME	20010041		4 2 NAME			C change Modition	
STREET ADDRESS	Kelly McClellan			4 3 STREET	2239004		
CITY-ST-ZIP	2633 Lantana Rd., #36		4.4 CITY-S				
TITLE	antana, F1 33462		5.1 TITLE			Change Addition	
NAME				5.2 NAME			• —
STREET ADDRESS				5 3 STREET	ADDRESS		
CITY-ST-ZIP				5.4 CITY - S	1 - ZIP		
TITLE			DELETE	6.1 TITLE			Change Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET	ADDRESS		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental arinual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chargest or on an attachment with an address.